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Sodium Nitrate Solid

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C.A.D.0.8.6.5.1.0.0.0.5		Manifest Document No. 911179		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator Name and Mailing Address McDonnell Douglas Aircraft Co. 19503 S. Normandie Avenue Torrance, CA 90502						A. State Manifest Document Number 89479021									
4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10						B. State Generator's ID H.A.H.Q.3.6.0.0.5.6.9.8									
5. Transporter 1 Company Name Ward-Barker, Inc.						C. State Transporter's ID 101500									
6. US EPA ID Number C.A.D.9.8.1.5.7.1.1.7.7						D. Transporter's Phone (213)432-7266									
7. Transporter 2 Company Name						E. State Transporter's ID									
8. US EPA ID Number						F. Transporter's Phone									
9. Designated Facility Name and Site Address USPCI Grassy Mountain Facility U.S. Pollution Control, Inc. 3 Mi.E., 7 Mi.N. Knolls Ex. 41 Clive, Ot. 84074						G. State Facility's ID									
10. US EPA ID Number U.T.D.9.9.1.3.0.1.7.4.8						H. Facility's Phone (801)534-0054									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol					
a. Waste Sodium Nitrate, Oxidizer, UN1498 (D001) b. c. d.						048 DIM 32690 P		32690		P					
												State		Waste No.	
												181		D001	
												EPA/Other			
												State			
J. Additional Descriptions for Materials Listed Above Waste Sodium Nitrate 100% Solids						K. Handling Codes for Wastes Listed Above									
Acceptance # GM90-0918-90 Return to Generator if Rejected. SA 36940						a.									
						b.									
						c.									
15. Special Handling Instructions and Additional Information Guide #35, May cause burns, avoid breathing dust. Keep from Combustible materials.						PROFILE #35150									
						HAULER SITE									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name Kris L. Anderson Agent for M.D.A.C.						Signature <i>[Signature]</i>			Month Day Year 042690						
17. Transporter 1 Acknowledgement of Receipt of Materials															
Printed/Typed Name MARK VERGOVEN						Signature <i>[Signature]</i>			Month Day Year 1012690						
18. Transporter 2 Acknowledgement of Receipt of Materials															
Printed/Typed Name						Signature			Month Day Year						
19. Discrepancy Indication Space															
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name JOHN W. HAIGHT						Signature <i>[Signature]</i>			Month Day Year 101430190						

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C.A.D.0.8.6.5.1.0.0.0.5		Manifest Document No. 9111779		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address McDonnell Douglas Aircraft Co. 19503 S. Normandie Avenue Torrance, CA 90502						A. State Manifest Document Number 89479021									
						B. State Generator's ID H.A.H.Q.3.6.0.0.5.6.9.8									
4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10						C. State Transporter's ID 101500									
5. Transporter 1 Company Name Ward-Barker, Inc.						D. Transporter's Phone (213)432-7266									
6. US EPA ID Number C.A.D.9.8.1.5.7.1.1.7.7						E. State Transporter's ID									
7. Transporter 2 Company Name						F. Transporter's Phone									
8. US EPA ID Number						G. State Facility's ID									
9. Designated Facility Name and Site Address USPCI Grassy Mountain Facility U.S. Pollution Control, Inc. 3 Mi.E., 7 Mi.N. Knolls Ex. 41 Clive, Ot. 84074						H. Facility's Phone (801)534-0054									
10. US EPA ID Number U.T.D.9.9.1.3.0.1.7.4.8															
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. Waste Sodium Nitrate, Oxidizer, UN1498 (D001) b. c. d.						048 DIM 32690 P		32690		P		State 181			
												EPA/Other D001			
												State			
												EPA/Other			
												State			
												EPA/Other			
												State			
												EPA/Other			
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												EPA/Other			
												State			
												EPA/Other			
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
Waste Sodium Nitrate 100% Solids Acceptance # GM90-0918-90 Return to Generator if Rejected.						a.									
						b.									
15. Special Handling Instructions and Additional Information Guide #35, May cause burns, avoid breathing dust. Keep from Combustible materials. 162						c.									
						d.									
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Printed/Typed Name Kris L. Anderson Agent for M.D.A.C.						Signature <i>[Signature]</i>		Month 04		Day 26		Year 90			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name MARK VRIGOVEN		Signature <i>[Signature]</i>		Month 10		Day 26		Year 90	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month		Day		Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name						Signature		Month		Day		Year			